FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000075861 (9) DOCUMENT

CAROLIAN INCORPORATED

FILED Apr 30 1998 8:00am Secretary of State

T TRACTOR CON TRES TRACTOR AND AND THE CONTRACTOR AND AND AND AND AND ASSESSMENT OF THE CONTRACTOR ASS

Principal Place of Business Mailing Address						+ I TEGLIDAY DID JOHN TOOM BOWN BANK EARN BUNK I DOOR BYSAN FELLY BIRDY WELL AND IN
2039 PARK ST JACKBONVILLE FL 32204			2039 PARK ST JACKSONVILLE FL 32204			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						09/02/1997
2. Principal F	Place of Business	2a. Mailing Add	ress			4. FEI Number Applied For
21		26				59-346 9507 Not Applicable
Sulte, Apt.	Sulte, Apt. #, etc. Suite, Apt. #, 27				· · · ·	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required
City & State City & State						6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution
Zip	Country	Zip	_	Country		8. This corporation owes or has paid the current year Intancible
24	25	29	30			Personal Property Tax due June 30. Yes
9, Name and Address of Current Registered Agent BACCETT 1441 T B1 Name					Name	10. Name and Address of New Registered Agent
	ASSETT, IAN T				140110	
2039 PARK ST JACK S ONVILLE FL 32204			82	82 Street Address (P.O. Box Number is Not Acceptable)		
J/	IONODIAAITTE LT 25504			83		
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508. Flori	da Statutes, th	ne above	e-named	corporation submits this statement for the purpose of changing its registered
office or	registered agent, or both, in the same familiar with, and accept the common series.	State of Florida, Such char	nge was autho	rized hy	the corr	poration's board of directors. I hereby accept the appointment as registered
	an intermital with, and accept the t	abligitions of, occion our	.boob, Honda	Otatores		
SIGNATURE	Signature, typed or printed name of registion	ed agent and the if applicable	(NOTE Regi	islered Age	nt signatura	required when reinstating) DATE
12.	OFFICERS	S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			ELETE	1.1 TITLE		PRESIDENT (P) Change Addition
NAME				1.2 NAME		IAN THOMAS DASSETT 1292 S. EDGEWOOD AVENUE
STREET ADDRESS				1.3 STREET		
CITY-ST-ZIP			1.4 CITY - S	T - ZIP	JACKSONVILLE FLORIDA 32205	
TITLE		<u>.</u> ∪ ∪		2.1 TITLE		VICE - PRESIDENT (V) Change Addition
NAME				2.2 NAME	1000000	CAROUYN P. BASSETT 1292 S. EGGENOOD AVE
STREET ADDRESS				2.3 STREET		JACKSONVILLE FLORIDA 32205
CITY+ST-ZIP TITLE	<u></u>	Пп		2. 4 CITY - S 3.1 TITLE	I-ZIP	Change Addition
NAME		<u></u> ,		3.2 NAME		Change Districti
STREET ADDRESS				3.3 STREET	ADDRECC	
CITY-ST-ZIP				3.4. CITY - S		
TITLE				4.1 TOLE	11-215	☐ Change ☐ Addition
NAME				4. 2 NAME		_ ···· _ ····
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-\$T-ZIP				4.4 CITY-S		
TITLE		[] D		5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or this see empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

DELETE

Change

Addition